

<i>SERFF Tracking Number:</i>	<i>ETPF-126516625</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Heartland National Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>45016</i>
<i>Company Tracking Number:</i>	<i>2009MSRPT</i>		
<i>TOI:</i>	<i>MS06 Medicare Supplement - Other</i>	<i>Sub-TOI:</i>	<i>MS06.000 Medicare Supplement - Other</i>
<i>Product Name:</i>	<i>Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>2009MSRPT/2009MSRPT</i>		

Filing at a Glance

Company: Heartland National Life Insurance Company

Product Name: Medicare Supplement

SERFF Tr Num: ETPF-126516625 State: Arkansas

TOI: MS06 Medicare Supplement - Other

SERFF Status: Closed-Accepted State Tr Num: 45016

For Informational Purposes

Sub-TOI: MS06.000 Medicare Supplement - Other

Co Tr Num: 2009MSRPT

State Status: Filed-Closed

Filing Type: Form

Reviewer(s): Stephanie Fowler

Authors: Mark Banks, Kathy Foster, Disposition Date: 04/01/2010

John Neville

Date Submitted: 02/24/2010

Disposition Status: Accepted For Informational Purposes

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: 2009MSRPT

Status of Filing in Domicile: Pending

Project Number: 2009MSRPT

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 04/01/2010

Explanation for Other Group Market Type:

State Status Changed: 03/02/2010

Deemer Date:

Created By: Kathy Foster

Submitted By: Kathy Foster

Corresponding Filing Tracking Number:

Filing Description:

Attached for your review is Heartland National Life Insurance Company's 2009 Medicare Supplement multiple policy report, due March 1, 2010

Company and Contact

Filing Contact Information

Kathy Foster, Analyst, Regulatory Compliance Kathy.Foster@EquiLife.com

SERFF Tracking Number: ETPF-126516625 State: Arkansas
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Company Tracking Number: 2009MSRPT
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Medicare Supplement
Project Name/Number: 2009MSRPT/2009MSRPT

3 Triad Center 800-352-5150 [Phone] 3468 [Ext]
Salt Lake City, UT 84180 801-579-3471 [FAX]

Filing Company Information

(This filing was made by a third party - equitablelifecasualtytpf)

Heartland National Life Insurance Company CoCode: 66214 State of Domicile: Indiana
P O Box 2878 Group Code: Company Type: Life & Health
Salt Lake City, UK 84110 Group Name: State ID Number:
(866) 916-7971 ext. [Phone] FEIN Number: 64-0431935

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? Yes
Fee Explanation: \$50.00 per form
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Heartland National Life Insurance Company	\$50.00	02/24/2010	34436204

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	04/01/2010	04/01/2010

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Third Party Authorization	Kathy Foster	02/24/2010	02/24/2010

<i>SERFF Tracking Number:</i>	<i>ETPF-126516625</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Project Name/Number:</i>	<i>2009MSRPT/2009MSRPT</i>		

Disposition

Disposition Date: 04/01/2010

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	ETPF-126516625	State:	Arkansas
Filing Company:	Heartland National Life Insurance Company	State Tracking Number:	45016
Company Tracking Number:	2009MSRPT		
TOI:	MS06 Medicare Supplement - Other	Sub-TOI:	MS06.000 Medicare Supplement - Other
Product Name:	Medicare Supplement		
Project Name/Number:	2009MSRPT/2009MSRPT		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Supporting Document	2009 Medicare Supplement Duplication Report	Accepted for Informational Purposes	Yes
Supporting Document	Third Party Authorization	Accepted for Informational Purposes	Yes

SERFF Tracking Number: ETPF-126516625 State: Arkansas
Filing Company: Heartland National Life Insurance Company State Tracking Number: 45016
Company Tracking Number: 2009MSRPT
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Medicare Supplement
Project Name/Number: 2009MSRPT/2009MSRPT

Amendment Letter

Submitted Date: 02/24/2010

Comments:

We neglected to attach the Third Party Authorization to File when we filed this form. It has now been attached as Supporting Documentation.

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Third Party Authorization

Comment:

Third Party Authorization 11-08.pdf

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Project Name/Number:	2009MSRPT/2009MSRPT		

Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification		
Bypass Reason:	Not applicable		
Comments:			
Bypassed - Item:	Application		
Bypass Reason:	Not applicable		
Comments:			
Bypassed - Item:	Health - Actuarial Justification		
Bypass Reason:	Not applicable		
Comments:			
Bypassed - Item:	Outline of Coverage		
Bypass Reason:	Not applicable		
Comments:			
Satisfied - Item:	2009 Medicare Supplement Duplication Report	Accepted for Informational Purposes	04/01/2010
Comments:			
Attachment:			
'09 MS Duplication Report - Heartland.pdf			

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		Item Status:	Status
			Date:
Satisfied - Item:	Third Party Authorization	Accepted for Informational Purposes	04/01/2010

Comments:

Attachment:

Third Party Authorization 11-08.pdf

FORM FOR REPORTING MEDICARE SUPPLEMENT POLICIES

Company Name: Heartland National Life Insurance Company

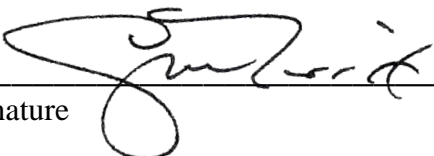
Address: P.O. Box 2878
Salt Lake City, UT 84110-2878

Phone Number: 800-916-7971

Due March 1, annually

The purpose of this form is to report the following information on each resident of this state who has in force more than one Medicare supplement policy or certificate. The information is to be grouped by individual policyholder.

Policy and Certificate #	Date of Issuance
None	


Signature

Christopher M. McDaniel, President and Chief Executive Officer
Name and Title (please type)

February 24, 2010
Date



November 19, 2008

RE: Form Filing Authorization

This letter will serve as authorization from Heartland National Life Insurance Company ("Heartland") for Equitable Life & Casualty Insurance Company to file all rates, policies and related forms on Heartland's behalf, and to respond to all inquiries regarding such filings with all state insurance departments and jurisdictions.

This authorization shall be valid until revoked by Heartland.

Sincerely,

A handwritten signature in black ink, appearing to read "McDaniel", is written over a large, stylized loop.

Christopher M. McDaniel
President, Chief Executive Officer & Chairman of the Board
Heartland National Life Insurance Company

cc: Robert E. Anderson, Chief Operating Officer, Equitable Life & Casualty Insurance Company
Kendall R. Surfass, Vice President, Secretary and General Counsel, Equitable Life & Casualty Insurance Company